



Application – Approved Vendor List

Appraisal Services

ATT: Chief Appraiser
South Florida Water Management District
3301 Gun Club Road, MS 7350
West Palm Beach, FL 33406

Name:

State-Certified General Appraiser Number:

Professional Designation & Number:

Company Name:

Mailing Address:

Phone Number:

Fax Number:

Cell Phone Number:

Email Address:

FEIN or Social Security Number:

Minority or Women Owned Business:

☐ No ☐ Yes

EXPERIENCE – PLEASE INDICATE THE NUMBER OF ASSIGNMENTS FOR EACH WITHIN THE LAST 5 YEARS

	Vacant Land		Grazing Land		Crop Land
	Grove		Nursery		RV/MH Park
	Rural Residential		Rock Mine		Appraisal Review

AREA – PLEASE INDICATE THE COUNTIES IN WHICH YOU ARE WILLING TO WORK

Broward	Charlotte	Collier	Glades	Hendry	Highlands	Lee	Martin
Miami-Dade	Monroe	Okeechobee	Orange	Osceola	Palm Beach	Polk	St. Lucie

Have you testified as an expert witness at a jury trial? ☐ No ☐ Yes

Hourly Rate for Expert Witness Services

I certify that the information listed as work experience is correct and that I personally participated in and certified all assignments considered in this application.

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Signature

Date

Required Attachments:

Resume

Copy of a recent appraisal (Partial Acquisition Preferred)

Insurance Certificate (Company Liability, Automobile, Workmen's Comp.)

For District Use Only

Verifications:

State-Certification

Designation

Relevant Experience

Resume

Sample Appraisal

Insurance Certificate